

WA-82 (09-01-03)	U.S. DEPARTMENT OF AGRICULTURE Farm Service Agency United States Warehouse Act	1. FOR FSA USE ONLY				
WAREHOUSE OPERATOR'S IRREVOCABLE LETTER OF CREDIT (See Page 2 for the Privacy Act and Public Burden Statements.)		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">A. License Number</td> <td style="width:50%;">B. Initials</td> </tr> <tr> <td colspan="2">C. ILC Number</td> </tr> </table>	A. License Number	B. Initials	C. ILC Number	
A. License Number	B. Initials					
C. ILC Number						
See Instructions before completion of Items 2(a) through 2(h) of this form.						

2. The undersigned: (a) _____

 (Name of Issuer) (Financial Institution)

of (address) (b) _____,

by order of our client: (c) _____

 (Principal, Name of Legal Entity, Warehouse Operator) Proprietor Partnership Limited Partnership LLC Corporation

_____ (Principal: Name of Legal Entity, Warehouse Operator)

(d) _____, at (e) _____,
 _____ (State of Incorporation or Where Organized) _____ (Principal Place of Business (City))

(f) _____, operating the following warehouse(s) for the storage of
 _____ (Principal Place of Business (State)) _____

(g) _____ (Agricultural Product(s))

hereby open our unconditional, assignable, irrevocable Letter of Credit number (h) _____

in favor of the United States Department of Agriculture, Farm Service Agency, as Beneficiary, for an amount not to exceed the aggregate sum of: (i) \$ _____ .00, (j) _____ Dollars effective on the (k) _____ (Day) day of (l) _____ (Month and Year) for an indefinite period but not less than two years. The issuing institution is a commercial bank in good standing with deposits insured by the Federal Deposit Insurance Corporation or an institution in good standing regulated by the Farm Credit Administration.

3. The conditions of these obligations are such that,

The Principal is either operating warehouse(s) licensed, or for which application has been made, under the United States Warehouse Act (the Act), identified as:

(a) License No.	(b) Name of Warehouse	(c) City	(d) County	(e) State
--------------------	--------------------------	-------------	---------------	--------------

For in excess of 5 warehouses, please attach an 8 1/2 x 11 inch sheet listing the warehouses in the manner of the above followed by a statement "This listing is an integral part of the irrevocable letter of credit number _____ executed effective _____ ." This statement must be signed by both the Principal and Issuing Institution.

4. Now, therefore, the funds under this Letter of Credit are available against sight drafts by the Beneficiary.

5. Each such draft shall be accompanied by a certificate that the Principal has failed to comply with the terms and conditions of the Act, the regulations, or licensing agreements issued thereunder. Upon receipt of the sight drafts and certificate at:

_____ (Address of Issuer)

on or before the expiration date of this Letter of Credit, the Issuer will promptly honor the drafts.

6. Provided, however, that this Letter of Credit may be terminated after a period of two years from the effective date by the Issuer, giving written notice by certified mail to the beneficiary of their intent to terminate this Letter of Credit and all liability there under. This notice will be effective 120 calendar days after the date the Beneficiary receives such notice, except the right of the Beneficiary shall not be affected by such notice as to any claims rising hereunder before the effective date of such termination notice. The liability under this Letter of Credit to the Beneficiary will extend for one year or until all claims against the Letter of Credit filed in the one year period, have been settled, whichever is later.

7. Executed this _____ .
(Date) MM-DD-YYYY

8. Issuer

Financial Institution: (a) _____

By: (b) _____

Title: (c) _____

FDIC Certificate Number: _____

FCA Institution Number: _____

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is the regulations at 7 CFR Part 735. The information will be used to complete the terms of a license and licensing agreement between the warehouse operator and the Deputy Administrator for Commodity Operations. Furnishing the requested information is voluntary, however, without it, eligibility to be licensed under the United States Warehouse Act cannot be determined. This information may be provided to other agencies, IRS, Department of Justice, or other State and Federal Law enforcement agencies, and in response to a court magistrate or administrative tribunal. The provisions of criminal and civil fraud statutes, including 18 USC 286, 287, 371, 641, 651, 1001; 1014, and 31 USC 3729, may be applicable to the information provided.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0560-0120. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. **RETURN THIS COMPLETED FORM TO THE KANSAS CITY COMMODITY OFFICE (KCCO), WAREHOUSE LICENSE AND EXAMINATION DIVISION, STOP 9148, P.O. BOX 419205, KANSAS CITY, MO 64141-6205.**

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, and marital or family status. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (202) 720-5964 (voice or TDD). USDA is an equal opportunity provider and employer.